



DA Case # _____

LOUISIANA VICTIM NOTICE AND REGISTRATION FORM

CONFIDENTIAL – NOT PUBLIC RECORD

SECTIONS A & B TO BE COMPLETED BY THE LAW ENFORCEMENT OFFICER ON SCENE

The person requesting notification must provide ALL information requested in Section B of this form. The information on this form shall be kept confidential by all law enforcement and judicial agencies and used only for the purposes required by law.

1. For a crime victim who is a minor, the name of a person requesting notification may be a parent or guardian.
2. In those cases where the victim is incapacitated or deceased, a single designated family member as defined in LSA-R.S. 46:1842(3), or guardian, may request notification.

Please print all information using blue or black ink only.

SECTION A: (To be completed by investigating officer)

Arrestee/Offender's Name: _____ Arrestee/Offender's Date of Birth: _____

Date of Arrest: _____ Crime/Offense: _____

Arresting Agency: _____ Arresting Officer(s): _____

Incident # _____ Docket # _____ Summons _____ Warrant Issued/Arrest Pending _____

SECTION B: (To be completed and signed by victim or their designated family member)

Location (City, Parish) Where Crime Occurred: _____ Date of Crime: _____

Victim's Name (Mr./Mrs./Ms.): _____

Victim's Age (At Time of Crime): _____ Victim's Date of Birth: _____

Person Requesting Notification: _____

Mailing Address: _____ Physical Address: _____

City: _____ State: _____ Zip Code: _____

Daytime Phone Number: _____ Ext. _____ Cell Phone Number: _____

Evening Phone Number: _____ E-mail Address: _____

You Are (Check One): _____ Victim of Offense _____ Witness to Offense _____ Parent/Guardian to Victim

_____ Designated Family Member of Incapacitated or Deceased Victim

Check One:

_____ I acknowledge receipt of this form. I understand that it is my responsibility to update my mailing address and telephone numbers with the arresting agency and district attorney's office in the event that either or both shall change, and that my failure to do so may stop notification and remove all responsibility for notification under the law.

_____ I DECLINE to register for notification at this time.

SIGNATURE: _____ DATE: _____

NOTE: You can also register to receive an automated notification when the arrestee/offender is released from custody, and other vital information, by contacting the Louisiana Automated Victim Notification System (LAVNS) toll free at 1-866-528-6748 or WWW.LAVNS.ORG. LAVNS is an anonymous, free service. LAVNS PIN # _____

Important Information About Victim Notification

R.S. 46:1844(A)(1) mandates the distribution of the Louisiana Victim Notice and Registration Form by law enforcement to the victim or designated family member of the victim of a homicide, felony crime of violence as defined or enumerated in R.S. 14:2(B), sexual offense, certain vehicular related offenses, offense committed against a family or household member as defined in R.S. 46:2132(4) or dating partner as defined in R.S. 46:2151(B), or attempts to commit these crimes, including but not limited to:

- Solicitation for murder
- First degree murder
- Second degree murder
- Manslaughter
- Aggravated battery
- Second degree battery
- Aggravated assault
- Mingling harmful substance
- Aggravated rape
- Forcible rape
- Simple rape
- Sexual battery
- Second degree sexual battery
- Intentional exposure to AIDS virus
- Aggravated kidnapping
- Second degree kidnapping
- Simple kidnapping
- Aggravated arson
- Aggravated criminal damage to property
- Aggravated burglary
- Armed Robbery
- First degree robbery
- Simple robbery
- Purse snatching
- Extortion
- Assault by drive-by shooting
- Aggravated crime against nature
- Carjacking
- Illegal use of weapons or dangerous instrumentalities
- Terrorism
- Aggravated second degree battery
- Aggravated assault upon a peace officer with a firearm
- Aggravated assault with a firearm
- Armed robbery; use of a firearm; additional penalty
- Second degree robbery
- Disarming of a peace officer
- Stalking
- Second degree cruelty to juveniles
- Aggravated flight from an officer
- Aggravated incest
- Battery of a police officer
- Trafficking of children for sexual purposes
- Human trafficking
- Home invasion
- Vehicular homicide
- Domestic abuse battery
- Domestic abuse aggravated assault
- Any sexual offense
- Any offense against the person as defined in the Criminal Code committed against a family or household member as defined in R.S. 46:2132(4) or dating partner as defined in R.S. 46:2151(B).

R.S. 46:1844(B) further mandates:

"If requested by registering with the appropriate law enforcement or judicial agency as outlined in Subsection T of this Section, the clerk of court shall provide reasonable notice to a victim, or a designated family member of judicial proceedings relating to their case. The notice required pursuant to this Subsection may be made by any method reasonably calculated to notify the victim or designated family member of the judicial proceeding in a timely manner."

R.S. 46:1844(T)(1) also mandates:

"The district attorney shall include the completed victim notice and registration form with any subsequent bill of information or indictment that is filed with the clerk of court. Upon conviction, the victim notice and registration form shall be included in the documents sent by the clerk of court to the Department of Public Safety and Corrections, the law enforcement agency having custody of the defendant, or the division of probation and parole."

In accordance with R.S. 46:1844(T)(2), "All victim notice and registration forms, and the information contained therein, shall be kept confidential by all law enforcement and judicial agencies having possession. The information shall be used only for the purposes required by this Chapter, and shall be released only upon court order after contradictory hearing."



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SECTIONS A & B TO BE COMPLETED BY THE LAW ENFORCEMENT OFFICER ON SCENE

The person requesting notification must provide ALL information requested in Section B of this form. The information on this form shall be kept confidential by all law enforcement and judicial agencies and used only for the purposes required by law.

1. For a crime victim who is a minor, the name of a person requesting notification may be a parent or guardian.
2. In those cases where the victim is incapacitated or deceased, a single designated family member as defined in LSA-R.S. 46:1842(3), or guardian, may request notification.

Please print all information using blue or black ink only.

SECTION A: (To be completed by investigating officer)

Arrestee/Offender's Name: _____ Arrestee/Offender's Date of Birth: _____
Date of Arrest: _____ Crime/Offense: _____
Arresting Agency: _____ Arresting Officer(s): _____
Incident # _____ Docket # _____ Summons _____ Warrant Issued/Arrest Pending _____

SECTION B: (To be completed and signed by victim or their designated family member)

Location (City, Parish) Where Crime Occurred: _____ Date of Crime: _____
Victim's Name (Mr./Mrs./Ms.): _____
Victim's Age (At Time of Crime): _____ Victim's Date of Birth: _____
Person Requesting Notification: _____
Mailing Address: _____ Physical Address: _____
City: _____ State: _____ Zip Code: _____
Daytime Phone Number: _____ Ext. _____ Cell Phone Number: _____
Evening Phone Number: _____ E-mail Address: _____
You Are (Check One): _____ Victim of Offense _____ Witness to Offense _____ Parent/Guardian to Victim
_____ Designated Family Member of Incapacitated or Deceased Victim

Check One:

_____ I acknowledge receipt of this form. I understand that it is my responsibility to update my mailing address and telephone numbers with the arresting agency and district attorney's office in the event that either or both shall change, and that my failure to do so may stop notification and remove all responsibility for notification under the law.

_____ I DECLINE to register for notification at this time.

SIGNATURE: _____ DATE: _____

NOTE: You can also register to receive an automated notification when the arrestee/offender is released from custody, and other vital information, by contacting the Louisiana Automated Victim Notification System (LAVNS) toll free at 1-866-528-6748 or WWW.LAVNS.ORG. LAVNS is an anonymous, free service. LAVNS PIN # _____

Important Information About Victim Notification

Victims or designated family members of victims of certain crimes are entitled to certain rights under **Louisiana's Crime Victim Bill of Rights**, including but not limited to:

- The right to receive emergency social or medical services as soon as possible.
- The right to be notified of a defendant's arrest, release on recognizance, posting of bond, release pending charges being filed, release due to rejection of charges by the district attorney, escape, or re-apprehension.
- The right to be interviewed in a private setting and to a secure area during criminal proceedings.
- The right to requests for assistance by judicial and law enforcement agencies in informing employers that the need for cooperation in the prosecution of the case may necessitate absence from work.
- The right to reasonable notice and to be present and heard during all critical stages of pre-conviction and post-conviction proceedings, and the right to be notified of scheduling changes of criminal justice proceedings.
- The right to consult with the prosecution prior to the trial and final disposition of the case.
- The right to refuse to be interviewed by the accused or a representative of the accused.
- The right to review and comment upon the pre-sentence report prior to imposition of sentencing, and the right to be notified of the minimum and maximum sentence allowed by law.
- The right to be present at all phases of the court proceedings, including the sentencing hearing.
- The right to make a written or oral impact statement.
- The right to seek restitution.
- The right to a reasonably prompt conclusion to the case.

R.S. 46:1844(T) mandates:

* * *

(1) In order for a victim or designated family member to be eligible to receive notices hereunder and exercise the rights provided in this Chapter, the victim or designated family member must complete a form promulgated by the Louisiana Commission on Law Enforcement and Administration of Criminal Justice. The form shall be completed by the victim or designated family member and shall be filed with the law enforcement agency investigating the offense of which the person is a victim, as defined in this Chapter. The completed victim notice and registration form shall be included in the documents sent by the law enforcement agency to the district attorney for prosecution. The district attorney shall include the completed victim notice and registration form with any subsequent bill of information or indictment that is filed with the clerk of court. Upon conviction, the victim notice and registration form shall be included in the documents sent by the clerk of court to the Department of Public Safety and Corrections, the law enforcement agency having custody of the defendant, or the division of probation and parole.

(2) All victim notice and registration forms, and the information contained therein, shall be kept confidential by all law enforcement and judicial agencies having possession. The information shall be used only for the purposes required by this Chapter, and shall be released only upon court order after contradictory hearing.

* * *

By completing and properly filing this form, a victim has officially registered for notification and every attempt should be made to notify them of the above events based on the contact information they provided.

To qualify for these statutory rights, the registrant or their family member must be a victim of a homicide, felony crime of violence as defined or enumerated in R.S. 14:2(B), sexual offense, certain vehicular related offenses, offense committed against a family or household member as defined in R.S. 46:2132(4) or dating partner as defined in R.S. 46:2151(B), or attempts to commit these offenses, including but not limited to:

- | | | |
|--|--|--|
| • Solicitation for murder | • Aggravated burglary | • Aggravated flight from an officer |
| • First degree murder | • Armed Robbery | • Aggravated incest |
| • Second degree murder | • First degree robbery | • Battery of a police officer |
| • Manslaughter | • Simple robbery | • Trafficking of children for sexual purposes |
| • Aggravated battery | • Purse snatching | • Human trafficking |
| • Second degree battery | • Extortion | • Home invasion |
| • Aggravated assault | • Assault by drive-by shooting | • Vehicular homicide |
| • Mingling harmful substance | • Aggravated crime against nature | • Domestic abuse battery |
| • Aggravated rape | • Carjacking | • Domestic abuse aggravated assault |
| • Forcible rape | • Illegal use of weapons or dangerous instrumentalities | • Any sexual offense |
| • Simple rape | • Terrorism | • Any offense against the person as defined in the |
| • Sexual battery | • Aggravated second degree battery | Criminal Code committed against a family or |
| • Second degree sexual battery | • Aggravated assault upon a peace officer with a firearm | household member as defined in R.S. 46:2132(4) |
| • Intentional exposure to AIDS virus | • Aggravated assault with a firearm | or dating partner as defined in R.S. 46:2151(B). |
| • Aggravated kidnapping | • Armed robbery; use of a firearm; additional penalty | |
| • Second degree kidnapping | • Second degree robbery | |
| • Simple kidnapping | • Disarming of a peace officer | |
| • Aggravated arson | • Stalking | |
| • Aggravated criminal damage to property | • Second degree cruelty to juveniles | |



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SECTIONS A & B TO BE COMPLETED BY THE LAW ENFORCEMENT OFFICER ON SCENE

The person requesting notification must provide ALL information requested in Section B of this form. The information on this form shall be kept confidential by all law enforcement and judicial agencies and used only for the purposes required by law.

1. For a crime victim who is a minor, the name of a person requesting notification may be a parent or guardian.
2. In those cases where the victim is incapacitated or deceased, a single designated family member as defined in LSA-R.S. 46:1842(3), or guardian, may request notification.

Please print all information using blue or black ink only.

SECTION A: (To be completed by investigating officer)

Arrestee/Offender's Name: _____ Arrestee/Offender's Date of Birth: _____
Date of Arrest: _____ Crime/Offense: _____
Arresting Agency: _____ Arresting Officer(s): _____
Incident # _____ Docket # _____ Summons _____ Warrant Issued/Arrest Pending _____

SECTION B: (To be completed and signed by victim or their designated family member)

Location (City, Parish) Where Crime Occurred: _____ Date of Crime: _____
Victim's Name (Mr./Mrs./Ms.): _____
Victim's Age (At Time of Crime): _____ Victim's Date of Birth: _____
Person Requesting Notification: _____
Mailing Address: _____ Physical Address: _____
City: _____ State: _____ Zip Code: _____
Daytime Phone Number: _____ Ext. _____ Cell Phone Number: _____
Evening Phone Number: _____ E-mail Address: _____
You Are (Check One): _____ Victim of Offense _____ Witness to Offense _____ Parent/Guardian to Victim
_____ Designated Family Member of Incapacitated or Deceased Victim

Check One:

_____ I acknowledge receipt of this form. I understand that it is my responsibility to update my mailing address and telephone numbers with the arresting agency and district attorney's office in the event that either or both shall change, and that my failure to do so may stop notification and remove all responsibility for notification under the law.

_____ I DECLINE to register for notification at this time.

SIGNATURE: _____ DATE: _____

NOTE: You can also register to receive an automated notification when the arrestee/offender is released from custody, and other vital information, by contacting the Louisiana Automated Victim Notification System (LAVNS) toll free at 1-866-528-6748 or WWW.LAVNS.ORG. LAVNS is an anonymous, free service. LAVNS PIN # _____

Directions for Completion:

- Please print all information using blue or black ink only.
- "Section A" to be completed by investigating officer. Please include offender's name, date of birth, date of arrest, and charges. Also include investigating agency and officer's name.
- "Section B" to be completed and signed by the victim, parent or guardian if victim is a minor, or designated family member.
- If the crime victim is a minor, please include the name of the parent or guardian as the person requesting notification.
- If the crime victim is incapacitated or deceased, a designated family member as defined under R.S. 46:1842(3) may request notification.
- Provide victim with copy of completed form marked "Victim's Copy."
- Forward copy marked "District Attorney's Copy" and "Clerk of Court Copy" with copy of arrest report to District Attorney's office.
- **IMPORTANT: Copy marked "Jail / Detention Center Copy" must be delivered or faxed to the jail or detention center IMMEDIATELY! Any delay in this process will result in a failure to notify the victim upon defendant's release as required by law. R.S. 46:1844(3) mandates:**

* * *

"All law enforcement agencies having custody of those accused or convicted of the offenses enumerated in R.S. 46:1842(9) shall, pursuant to Article I, Section 25 of the Constitution of Louisiana, notify crime victims or designated family members who have properly registered concerning an accused's or a defendant's arrest, release on recognizance, posting of bond, release pending charges being filed, release due to rejection of charges by the district attorney, escape, or re-apprehension."

* * *

Important Information About Victim Notification

R.S. 46:1844(A)(1) mandates the distribution of the Louisiana Victim Notice and Registration Form by law enforcement to the victim or designated family member of the victim of a homicide, felony crime of violence as defined or enumerated in R.S. 14:2 (B), sexual offense, certain vehicular related offenses, offense committed against a family or household member as defined in R.S. 46:2132(4) or dating partner as defined in R.S. 46:2151(B), or attempts to commit these offenses, including but not limited to:

- | | | |
|--|--|--|
| • Solicitation for murder | • Aggravated burglary | • Aggravated flight from an officer |
| • First degree murder | • Armed Robbery | • Aggravated incest |
| • Second degree murder | • First degree robbery | • Battery of a police officer |
| • Manslaughter | • Simple robbery | • Trafficking of children for sexual purposes |
| • Aggravated battery | • Purse snatching | • Human trafficking |
| • Second degree battery | • Extortion | • Home invasion |
| • Aggravated assault | • Assault by drive-by shooting | • Vehicular homicide |
| • Mingling harmful substance | • Aggravated crime against nature | • Domestic abuse battery |
| • Aggravated rape | • Carjacking | • Domestic abuse aggravated assault |
| • Forcible rape | • Illegal use of weapons or dangerous instrumentalities | • Any sexual offense |
| • Simple rape | • Terrorism | • Any offense against the person as defined in the Criminal Code committed against a family or household member as defined in R.S. 46:2132(4) or dating partner as defined in R.S. 46:2151(B). |
| • Sexual battery | • Aggravated second degree battery | |
| • Second degree sexual battery | • Aggravated assault upon a peace officer with a firearm | |
| • Intentional exposure to AIDS virus | • Aggravated assault with a firearm | |
| • Aggravated kidnapping | • Armed robbery; use of a firearm; additional penalty | |
| • Second degree kidnapping | • Second degree robbery | |
| • Simple kidnapping | • Disarming of a peace officer | |
| • Aggravated arson | • Stalking | |
| • Aggravated criminal damage to property | • Second degree cruelty to juveniles | |

In accordance with R.S. 46:1844(T)(2), "All victim notice and registration forms, and the information contained therein, shall be kept confidential by all law enforcement and judicial agencies having possession. The information shall be used only for the purposes required by this Chapter, and shall be released only upon court order after contradictory hearing."



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1. For a crime victim who is a minor, the name of a person requesting notification may be a parent or guardian.
2. In those cases where the victim is incapacitated or deceased, a single designated family member as defined in LSA-R.S. 46:1842(3), or guardian, may request notification.

Please print all information using blue or black ink only.

SECTION A: (To be completed by investigating officer)

Arrestee/Offender's Name: _____ Arrestee/Offender's Date of Birth: _____

Date of Arrest: _____ Crime/Offense: _____

Arresting Agency: _____ Arresting Officer(s): _____

Incident # _____ Docket # _____ Summons _____ Warrant Issued/Arrest Pending _____

SECTION B: (To be completed and signed by victim or their designated family member)

Location (City, Parish) Where Crime Occurred: _____ Date of Crime: _____

Victim's Name (Mr./Mrs./Ms.): _____

Victim's Age (At Time of Crime): _____ Victim's Date of Birth: _____

Person Requesting Notification: _____

Mailing Address: _____ Physical Address: _____

City: _____ State: _____ Zip Code: _____

Daytime Phone Number: _____ Ext. _____ Cell Phone Number: _____

Evening Phone Number: _____ E-mail Address: _____

You Are (Check One): _____ Victim of Offense _____ Witness to Offense _____ Parent/Guardian to Victim

_____ Designated Family Member of Incapacitated or Deceased Victim

Check One:

_____ I acknowledge receipt of this form. I understand that it is my responsibility to update my mailing address and telephone numbers with the arresting agency and district attorney's office in the event that either or both shall change, and that my failure to do so may stop notification and remove all responsibility for notification under the law.

_____ I DECLINE to register for notification at this time.

SIGNATURE: _____ DATE: _____

NOTE: You can also register to receive an automated notification when the arrestee/offender is released from custody, and other vital information, by contacting the Louisiana Automated Victim Notification System (LAVNS) toll free at 1-866-528-6748 or WWW.LAVNS.ORG. LAVNS is an anonymous, free service. LAVNS PIN # _____

LSA-R.S. 46:1844(3) mandates that "All law enforcement agencies having custody of those accused or convicted of the offenses enumerated in R.S. 46:1842(9) shall, pursuant to Article I, Section 25 of the Constitution of Louisiana, notify crime victims or designated family members who have properly registered concerning an accused's or a defendant's arrest, release on recognizance, posting of bond, release pending charges being filed, release due to rejection of charges by the district attorney, escape, or re-apprehension."

[illegible]

Jail / Detention Center Copy

LOUISIANA VICTIM NOTICE AND REGISTRATION FORM

SECTIONS A & B TO BE COMPLETED BY THE LAW ENFORCEMENT OFFICER ON SCENE

The person requesting notification must provide ALL information requested in Section B of this form. The information on this form shall be kept confidential by all law enforcement and judicial agencies and used only for the purposes required by law.

1. For a crime victim who is a minor (under the age of 18), the name of a person requesting notification may be a parent or guardian.
2. In those cases where the victim is incapacitated or deceased, a single designated family member or guardian may request notification.

Please print all information. Use ink only.

SECTION A:

Arrestee/Offender's Name: _____ Arrestee/Offender's Date of Birth: _____
Date of Arrest: _____ Incident/Offense/Complaint Number: _____
Arresting Agency: _____ Arresting Officer(s): _____
ATN #: _____ SID #: _____

SECTION B:

Location (City, Parish) Where Crime Occurred: _____ Date of Crime: _____
Victim's Name (Mr./Mrs./Ms.): _____
Victim's Age (At Time of Crime): _____ Victim's Date of Birth: _____
Person Requesting Notification: _____
Mailing Address: _____
City: _____ State: _____ Zip Code: _____
Daytime Phone Number: _____ Ext. _____ Cell Phone Number: _____
Evening Phone Number: _____ E-mail Address: _____
You are (Check One): _____ Victim of Offense _____ Witness to Offense _____ Parent/Guardian to Victim
_____ Designated Family Member of Incapacitated or Deceased Victim

I understand that it is my responsibility to update my mailing address and telephone numbers with the arresting agency in the event that either or both shall change, and that my failure to do so may stop notification and remove all responsibility for notification under the law.

SIGNATURE: _____ **DATE:** _____



You can also register to receive an automated notification when the arrestee/offender is released from custody, and other vital information, by contacting the Louisiana Automated Victim Notification System (LAVNS) toll free at 1-866-528-6748 or WWW.LAVNS.ORG. LAVNS is an anonymous, free service.

Important Information About Victim Notification

If you have been a victim or designated family member of a victim of certain crimes, you may be entitled to certain rights under **Louisiana's Crime Victim Bill of Rights**, including but not limited to:

- The right to receive emergency social or medical services as soon as possible.
- The right to be notified of a defendant's arrest, release on recognizance, posting of bond, release pending charges being filed, release due to rejection of charges by the district attorney, escape, or re-apprehension.
- The right to be interviewed in a private setting and to a secure area during criminal proceedings.
- The right to requests for assistance by judicial and law enforcement agencies in informing employers that the need for cooperation in the prosecution of the case may necessitate absence from work.
- The right to reasonable notice and to be present and heard during all critical stages of pre-conviction and post-conviction proceedings, and the right to be notified of scheduling changes of criminal justice proceedings.
- The right to consult with the prosecution prior to the trial and final disposition of the case.
- The right to refuse to be interviewed by the accused or a representative of the accused.
- The right to review and comment upon the pre-sentence report prior to imposition of sentencing, and the right to be notified of the minimum and maximum sentence allowed by law.
- The right to be present at all phases of the court proceedings, including the sentencing hearing.
- The right to make a written or oral impact statement.
- The right to seek restitution.
- The right to a reasonably prompt conclusion to the case.

In order for a victim or designated family member to be eligible to receive notices and exercise the rights listed above, the victim or designated family member must complete a "Louisiana Victim Notice and Registration Form" and file it with the law enforcement agency investigating the offense of which the person is a victim OR the district attorney's office that has jurisdiction over the case. By completing and properly filing this form you have officially registered for notification and every attempt will be made to notify you of the above events based on the contact information you have provided. **It is important that you notify the investigating law enforcement agency and district attorney's office of any changes in your contact information.**

To qualify for these statutory rights, you or your family member must be a victim of a homicide, felony crime of violence as defined or enumerated in R.S. 14:2(B), sexual offense, certain vehicular related offenses, offense committed against a family or household member as defined in R.S. 46:2132(4) or dating partner as defined in R.S. 46:2151(B), or attempts to commit any of these offenses, including but not limited to:

- | | | |
|--|--|--|
| • Solicitation for murder | • Aggravated burglary | • Aggravated flight from an officer |
| • First degree murder | • Armed Robbery | • Aggravated incest |
| • Second degree murder | • First degree robbery | • Battery of a police officer |
| • Manslaughter | • Simple robbery | • Trafficking of children for sexual purposes |
| • Aggravated battery | • Purse snatching | • Human trafficking |
| • Second degree battery | • Extortion | • Home invasion |
| • Aggravated assault | • Assault by drive-by shooting | • Vehicular homicide |
| • Mingling harmful substance | • Aggravated crime against nature | • Domestic abuse battery |
| • Aggravated rape | • Carjacking | • Domestic abuse aggravated assault |
| • Forcible rape | • Illegal use of weapons or dangerous instrumentalities | • Any sexual offense |
| • Simple rape | • Terrorism | • Any offense against the person as defined in the Criminal Code committed against a family or household member as defined in R.S. 46:2132(4) or dating partner as defined in R.S. 46:2151(B). |
| • Sexual battery | • Aggravated second degree battery | |
| • Second degree sexual battery | • Aggravated assault upon a peace officer with a firearm | |
| • Intentional exposure to AIDS virus | • Aggravated assault with a firearm | |
| • Aggravated kidnapping | • Armed robbery; use of a firearm; additional penalty | |
| • Second degree kidnapping | • Second degree robbery | |
| • Simple kidnapping | • Disarming of a peace officer | |
| • Aggravated arson | • Stalking | |
| • Aggravated criminal damage to property | • Second degree cruelty to juveniles | |

NOTE: If the District Attorney declines prosecution or reduces the charges to a charge not included in the list above, victim notification may not apply. You should contact the district attorney's office that has jurisdiction over the case if you have any questions or concerns about charges or the court proceedings.

Crime Victim Reparations Program

The State of Louisiana has established a program for the payment of compensation to innocent victims of violent crimes with unrecovered costs associated with personal injury, death, or catastrophic property loss. Applications and assistance for Crime Victim Reparations may be obtained from any Sheriff's Office or by contacting the Louisiana Commission on Law Enforcement, Crime Victim Reparations program at 1-888-6-VICTIM or (225) 925-4437, or via the website at www.lcle.la.gov/cvr.

Louisiana Department of Public Safety and Corrections Crime Victim Services Bureau

Victims and other persons directly affected by the criminal actions of an individual in the custody of the Department of Corrections are encouraged to contact the Crime Victims Services Bureau at 1-888-342-6110.

Nothing in this Section (LSA-R.S. 46:1844) shall be construed as creating a cause of action by or on behalf of any person for an award of costs or attorney fees, for the appointment of counsel for a victim, or for any cause of action for compensation or damages against the state of Louisiana, a political subdivision, a public agency, or a court, or any officer, employee, or agent thereof.